

Terms Associated with Co-Occurring Disorders*

Co-Occurring Disorders (COD)

refer to co-occurring substance-related and mental disorders.

Dual Diagnosis is defined as coexisting mental disorders and developmental disabilities.

Remission refers to the absence of distress or impairment due to a substance use or mental disorder.

Recovery is the process in which people are able to live, work, learn, and participate fully in their communities. For some individuals, recovery is the ability to live a fulfilling and productive life despite a disability. For others, recovery implies the reduction or complete remission of symptoms (President's New Freedom Commission on Mental Health).

Recovery should include self-directed actions and be enhanced by the concept of hope and the encouragement of others.

Relapse is the return to active substance use in a person with a diagnosed substance use disorder or the return of disabling psychiatric symptoms after a period of remission related to a nonaddictive mental disorder.

Integrated Screening is the determination of the likelihood that the person has a co-occurring substance use or mental disorder and an in-depth assessment is needed. The purpose is not to diagnose the specific type of disorder but to establish the need for an in-depth assessment.

Integrated Assessment consists of gathering information and engaging in a process with the service recipient that enables the provider to establish the presence or absence of co-occurring disorders. The purpose of an assessment is to establish (or rule out) the existence of a clinical disorder or service need and to work with the service recipient to develop a treatment and service plan.

Integrated Interventions are specific treatment strategies or therapeutic techniques in which all COD diagnoses or symptoms are combined in a single contact or in a series of contacts over time. Acute interventions may establish safety, as well as ongoing efforts to foster recovery.

A Program is a formally organized array of services and interventions provided in a coherent manner at a specific level of care in order to address the needs of a particular target population.



COD Program Types**

Addiction Only Services (AOS) or Mental Health Only Services (MHOS) are programs that provide treatment and recovery services for persons with addictive disorders or mental health disorders only.

Co-occurring Disorders Capable (CODC) programs are those that address co-occurring mental and substance-related disorders in their policies and procedures, assessment, treatment planning, program content and discharge planning. Even where such programs are geared primarily toward treating substance use or mental health disorders, program staff are able to address the interaction between mental and substance-related disorders and their effect on the consumers readiness to change – as well as relapse and recovery environment issues – through individual and group program content.

Co-occurring Disorders Enhanced (CODE) program has a higher level of integration of substance abuse and mental health treatment and recovery services. These programs are able to provide unified and integrated substance abuse and mental health treatment and recovery to consumers who have unstable or disabling co-occurring disorders. These programs are often indistinguishable as either an addiction or mental health treatment and recovery program.

Motivational Interviewer's Evidence-Based Practice for COD STAGES OF CHANGE***

- Precontemplation
- Contemplation
- Preparation
- Action
- Maintenance
- Relapse - can occur at any stage

Source Citations

*U.S. Department of Health and Human Services, SAMHSA's Co-Occurring Center for Excellence (Feb., 2005). *Definitions and Terms Relevant to Co-Occurring Disorders, Overview Paper No. 1*, pages 1-6.

**Adapted from the American Society of Addiction Medicine Patient Placement Criteria, Second Edition, Revised (ASAM PPC-2R) (2001).

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